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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) Docket Number (Optional) 10639/1					
		In re Application of Julie Theel			
		Application Number 10/668,049	9 6	Filed 09/22/03	
For Dismemberable Canine Appeasement Device and Method					
		Art Unit Examiner			
identified	application.	37 CFR 1.136(a) to extend the p			
The requested extension and appropriate non-small-entity fee are as follows (check time period desired):					
One month (37 CFR 1.		.17(a)(1))		\$ <u>110.00</u>	
☐ Two months (37 CFR ²		1.17(a)(2)) \$		\$	
	☐ Three months (37 CFI	1.17(a)(3)) \$		\$	
	☐ Four months (37 CFR	: 1.17(a)(4))		\$	
	☐ Five months (37 CFR	1.17(a)(5))		\$	
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown					
above is reduced by one-half, and the resulting fee is: \$ <u>55.00</u> . A check in the amount of the fee is enclosed.					
	Payment by credit card. Form PTO-2038 is attached.				
	☐ The Director has already been authorized to charge fees in this application to a Deposit Account.				
☐ The Director is hereby authorized to charge any fees which may be required,					
or credit any overpayment, to Deposit Account Number 502811.					
	I have enclosed a duplicate of	opy of this sheet.			
I am the applicant/inventor.					
assignee of record of the entire interest. See 37 CFR 3.71					
	Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
☑ attorney or agent of record. Registration Number <u>45,030</u>					
attorney or agent under 37 CFR 1.34(a).					
Registration number if acting under 37 CFR 1.34(a).					
WAF inclu	RNING: Information on this for uded on this form. Provide cr	m may become public. Credit edit card information and autho	card information	formation should not be n on PTO-2038.	
	03/17/2004	 -		woch W. I mist	
	Date			Signature	
	310-712-8319	-		Brooke W. Quist	
	Telephone Number			Typed or printed name	
NOTE: Sigr	natures of all the inventors or assignees on a signature is required, see below.	of record of the entire interest or their repres	sentative(s	Typed or printed name s) are required. Submit multiple forms if enefit by the public which is to file (and by the tion is estimated to take 6 minutes to complete, ding upon the individual case. Any comments on	
☐ Total	of forms are submitted.				
the amount of Trademark Of	time you require to complete this form and/ fice, U.S. Department of Commerce, P.O. END TO: Commissioner for Patents, P.O.	or suggestions for reducing this burden, shoul Box 1450, Alexandria, VA 22313-1450. DO	ld be sent t NOT SEN	to the Chief Information Officer, U.S. Patent and ID FEES OR COMPLETED FORMS TO THIS S	
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